**FILED** 

## 2002 UNIFORM RUSINESS REPORT (URB)

1. Entity Nam	MENT # P0000		Feb 27, 2002 8:00 am Secretary of State 02-27-2002 90069 041 ***150.00								
Principal Plac 3305 DUNBAR SARASOTA FL	DR	Mailing Address 3305 DUNBAR DR SARASOTA FL 34232									
<u> </u>	lace of Business	3. Mailing Address				T I LUBANTUL AN DUMA DENAL DENAL DENAL TRANS TRANS TRANS TRANS TRANS AND					
Suite, Apt.		Suite, Apt. #, etc.  City & State			- 4	DO NOT WRITE IN THIS SPACE  4. FEI Number Applied For					
Zip Country		Zip	ту	65-1054087  5. Certificate of Status Desired			Not Applicable \$8.75 Additional				
<u> </u>	6. Name and Address of Current	Registered Agent	1.	<u> </u>		Name and Add		<u> </u>	e Required	<u> </u>	-
BARKLEY, 3305 DUNI SARASOTA	BAR DR			Street A	/77_/, 	Number is I	twe # Not Agree fole)	FL	<b>13</b> 810904	<b>ラフム</b>	] - - - -
8. The above	named entity submits this statement for		velt	<u></u>	registered a	gent, or both, in	the State of Flori		392	-35	4
Tax filing r	ration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	FILE NOW After May 1, 20 Make Check Paya	002 Fee v	vill be \$5	50.00		Campaign Finar nd Contribution.	naing 🔲		May Be to Fees	
NAME STREET ADORESS	OFFICERS AND I P BARKLEY, W G 3305 DUNBAR DR SARASOTA FL 34232	DIRECTORS  Delete	12. TITLE NAME STREE	T ADDRESS ST-ZIP	Pres/	DDITIONS/CHA	<del></del>	—— <u> </u>	Change	Addition	CR2E034 (9/01)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ONIMOUTH TE GREEK	☐ Delete	TITLE	T ADDRESS	U.P/ Kath 3305	Sec/Bix lech D Duube	. Bark	let Sara	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREE CITY-S	T ADDRESS ST-ZIP			angunament and a second	C	] Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREE	T ADDRESS ST-ZIP					] Change	☐ Addition	
TITLE NAME STREET ADDRESS CHTY-ST-ZIP		☐ Delete	TITLE NAME STREE CITY-S	raddress St-Zip					] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	□ Delete	TITLE NAME STREE CITY-S	T ADDRESS ST-ZIP					] Change	☐ Addition	
indicated	urify that the information supplied with on this report or supplemental report is coration or the receiver or trustee empo or on an attachment with an address with the control of the supplement of the control of the	true and accurate and that	my signatu t as require t.	re shall ha ed by Cha Bay	ave the same	legal effect as i	made under oat	th; that I am appears in B	an officer of	or director Block 12 if	